Inited States Bankruptcy Court <u>SOUTHERN DISTRICT OF TEXAS</u> P.O.Box 1288, Houston TX 77208 (Houston Division)		PROOF CLAIM			
Name of Debtors	Case Number				
Stage Stores, Inc., a Delaware corporation Specialty Retailers, Inc., a Texas corporation Specialty Retailers, Inc. (NV), a Nevada corporation	00-35078-H2-11 00-35079-H2-11 00-35080-H2-11	788-15011 Creditor ID#: United States Bankruptcy Court Southern District of Texas			
*place an "x" beside the name of the Debtor you are filing a claim against		FILED			
Name of Creditor (The person or other entity to whom the debtor owes money or property):	JUN 2 6 2000				
D & H Glass Service	Attach copy of statement giving particulars.	Michael N. Milby, Clerk			
Name and address where notices should be sent: ***********************************	Check box if you have never received any notices from the bankruptcy court in this case				
908 S 15th St Vincennes IN 47591-4321	Check box if the address differs from the address on the envelope sent to you by the court.				
Account or other number by which creditor identifies debtor:	Check here replaces if this claim amends a prev	iously filed claim, dated:			
1. Basis for Claim	Retiree benefits as defined in 11 U Wages, salaries, and compensation Your SS#: Unpaid compensation for services from to (date)	pri (Fill out below) performed			
2. Date debt was incurred: ≤-12-30	3. If court judgment, date ob				
4. Total Amount of Claim at Time Case Filed: \$\$6. \\ If all or part of your claim is secured or entitled to priority, also composite the charges in additional charges.	piete Item 5 or 6 below.	Attach itemized statement of all interest or			
5. Secured Claim Check this box if your claim is secured by collateral (including a right of setoff).	6. Unsecured Priority Claim. Check this box if you have an unsecured priority claim Amount entitled to priority \$				
Brief Description of Collateral: Real Estate Motor Vehicle Other All personal and intangible property of Debtor's Estate Value of Collateral: \$	 Specify the priority of the claim: Wages, salaries, or commissions (up to \$4,300),* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3) Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4). Up to \$1,950* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6). Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(6). 				
Amount of arrearage and other charges <u>at time case filed</u> included secured claim, if any \$	Onici — Opecity applicable paragraph o	f 11 U.S.C. § 507(a). 98 and every 3 years thereafter with respect to			
 7. Credits: The amount of all payments on this claim has been credited and the purpose of making this proof of claim. 8. Supporting Documents: Attach copies of supporting documents, so notes, purchase orders, invoices, itemized statements of running accounts, occurry judgments, mortgages, security agreements, and evidence of perfection DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available explain. If the documents are voluminous, attach a summary. 9. Date-Stamped Copy: To receive an acknowledgment of the filing of enclose a stamped, self-addressed envelope and copy of this proof of claim. 	such as promissory contracts, on of lien. le, f your claim,	This Space Is for Court Use Only			
Sign and print the name and title, if any, of the creditor or (attach copy of power of attorney, if any):	other person authorized to file this claim	714			
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D&HGLASS SERVICES

RED WALLS

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CO-512

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OF VINCENNES, INC.
VINCENNES, INDIANA 47591
PHONE 882-8181 908 SOUTH 15TH STREET

TERMS: ALL ACCOUNTS NOT PAID WITHIN 30 DAYS OF BILLING WILL BE CHARGED 11/2% PER MONTH. 18% PER ANNUM.

MIN. CHARGE \$3.00.

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SIGNATURE				

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ACCOUNTING COPY

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